

SETOFF WAGE ASSIGNMENT

I, _____, _____,
(Name) (Social Security Number)

(Street Number) (City) (State) (Zip)

do hereby acknowledge my indebtedness to _____
(Name of Governmental Entity)

as indicated below:

EXPLANATION AND
LEGAL BASIS OF DEBT

AMOUNT OF DEBT
AS OF _____

For application to the above described indebtedness, I hereby authorize the Director of Accounts and Reports to deduct \$ _____ Dollars **per payroll period**, to the extent such amount is available from my disposable earnings, as defined by K.S.A. 60-2310(a)(2), for the payroll period. I also understand that any additional amounts determined to be due for the above described indebtedness will also be subject to this wage assignment.

I also authorize the Director of Accounts and Reports to effect the final setoff of any payments, due me by the State of Kansas, which have been or are currently being held by the State of Kansas without further notice or hearing. I further agree that this agreement does not prohibit the Director of Accounts and Reports from offsetting other payments, which may become due me by the State of Kansas, against the above described indebtedness. Payments subject to these setoff procedures would include such items as state tax refunds, travel reimbursement payments, and any other payment not specifically exempt by law from setoff.

Further, I hereby authorize the Director of Accounts and Reports to remit such amounts to the above governmental entity for credit to my account.

(Debtor's Signature) (Witness)

(Date)

Approved by: _____
(Team Leader, Accounts Receivable Setoff Team) (Date)

Accounts and Reports use only: SSN _____ Agency No. _____